JAN 05 2007 14:20 FR KIMBERLY-CLARK 7705877324 TO 915712732885 PART B - FEE(S) TRANSMITTAL Complete and seno this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 8 JAN 0 5 2007 or Fax (571)-273-2885 INSTRUCTIONS: This form stoud be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriated all further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated units appropriated with or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for appropriate All further corresponding indicated units apprected the maintenance fee at the state of the state Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: the Hlock I for any change of address) 23556 10/16/2006 Certificate of Mailing or Transmission KIMBERLY-CLARK WORLDWIDE, INC. I hereby certify that this Fcc(3) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. **401 NORTH LAKE STREET NEENAH, WI 54956** Lauga L. Rubino (Depositor's name) (Signature 2007 January (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 19,393 6181 11/19/2003 Robert Allen Janssen 10/716,767 TITLE OF INVENTION: GLOVE WITH MEDICATED POROUS BEADS PREV. PAID ISSUE FEE TOTAL FEE(S) DUE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE DATE DUE APPLN. TYPE \$0 1/05/2007 TBESHAH2 00000097 110875 10 lsaoisivoragaa NO \$1400 5300 10716767 ART UNIT CLASS-SUBCLASS EXAMINER 01 FC:1501 1400.00 DA BRUENJES, CHRISTOPHER P 1772 428-035700 02 FC:1504 300.00 DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, Hat : 8001 ง.ชย DA Vincent Kung Τ. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Scott B. Garrison (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) KIMBERLY-CLARK WORLDWIDE, INC. NEENAH, WI USA Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🧏 Corporation or other private group entity 🛄 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee

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